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Urban District of Tettenhall

(STAFFORDSHIRE)



ANNUAL REPORT

of the

Medical Officer of Health

For 1958

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TETTENHALL URBAN DISTRICT COUNCIL.

PUBLIC HEALTH COMMITTEE.

Chairman :

Councillor E. B. Gibbins.

Councillor F. C. Hill, J.P.

(Chairman of the Council).

„ Mrs. E. Bate.

„ E. G. L. Pearce, C.C.

„ S. O. Morton.

„ R. R. Wilson.

PUBLIC HEALTH OFFICERS
of the
LOCAL AUTHORITY

Medical Officer of Health /

S. C. J. FALKMAN,

L.R.C.P.(Ed.), L.R.C.S.(Ed.), L.R.F.P. & S.(Glas.).

L. M. ROTUNDA (Dublin), D.R.C.O.G.(London), D.P.H.(Durham)

(Died 4th August, 1958).

F. B. MACKENZIE, D.S.O., M.C., M.A., M.B., Ch.B., D.P.H.
 (Acting).

Public Health Inspector :

E. BARNES, M.A.P.H.I.

Pupil Public Health Inspector :

G. I. HYSLOP.

Clerical :

Mrs. B. M. BATES.

Official Address and Telephone No. of the Medical Officer of Health :

Council Offices, Upper Green, Tettenhall, Staffs.

Wolverhampton 52081-2-3.

Private Telephone No. : Wombourne 2392.

STATISTICAL SUMMARY, 1958.

Area : 2,503 acres.

Population : 12,920. (Estimated mid-year, 1958).

Number of Domestic Properties : 4,221.

Sum Represented by a Penny Rate : £627.

Rateable value : £156,206.

General Rate : 16/8d.

Birth Rate : 16.95. England and Wales : 16.4.

Death Rate : 8.44. England and Wales : 11.7.

Infantile Death Rate, per 1,000 births : 4.57. England and
Wales : 22.5.

Deaths from Respiratory Tuberculosis—Rate : Nil.

Deaths from other forms of Tuberculosis—Rate : .077.

**REPORT OF THE MEDICAL OFFICER OF HEALTH
FOR 1958.**

**To the Chairman and Members of the
Tettenhall Urban District Council.**

Mr. Chairman, Lady and Gentlemen,

As Acting Medical Officer of Health I herewith submit my Annual Report for 1958 in accordance with the requirements of Ministry of Health Circular 22/58. I incorporate information in respect of work carried out by your Public Health Inspector in the course of the year.

Before making any observations relevant to what follows in the body of the Report on the year's activities, I am sure you would wish me on your behalf to express appreciation of the services of your late Medical Officer of Health, Dr. S. C. J. Falkman from whom I took over as Acting Medical Officer in August.

He was a most vigilant and painstaking Medical Officer. From his Annual Reports during his five years of office he was most watchful in all matters affecting the health of the district, and his enthusiasm for observance of the Food Hygiene Regulations was unbounded.

The health of your Urban District would appear to have been satisfactory throughout the year under review. There has been no invalidity attributable to causes or factors related to conditions which could be considered as coming within the province of public health preventive measures, nor has there been any heavy incidence of infectious disease.

In the body of the report will be found information relating to :

- (a) General Provision of Health Services.
- (b) Vital Statistics.
- (c) Prevalence and Control over Infectious and other diseases.
- (d) General Public Health.

- (e) Sanitary circumstances of the Area.
- (f) Housing.
- (g) Work which falls within the sphere of your Public Health Inspector in relation to safe-guarding the health of the community.

Legislation as affecting the public health tends to become so much more embracing and accumulative that a most intimate knowledge of the enactments and procedure is required by your Public Health Officers.

The following major regulations affecting the work of the Department were introduced during the year under review :—

The Slaughter-houses (Hygiene) Regulations, 1958.

These regulations deal with the hygienic construction, layout and equipment of slaughterhouses and the practices to be observed therein.

The Slaughter of Animals (Prevention of Cruelty) Regulations, 1958.

These regulations re-enact the Slaughter of Animals (Prevention of Cruelty) Regulations, 1954, with certain amendments and additional requirements.

These two regulations will not be fully operative for some considerable period but they are a decisive step in the future control of slaughtering and slaughter-houses.

Clean Air Act. Parts of this Act came into operation specifying the maximum permitted periods for the emission of black smoke.

Other minor legislation was made under the Prevention of Damage by Pests Act, 1949, and the Milk and Dairies Regulations.

Considerable attention has been given by your Public Health Inspector throughout the year to the standard of food hygiene conditions prevailing in the district. It cannot be too fully realised that Food Hygiene forms a most important part of the system to safe-guard the public health. Unhygienic housing conditions are bad enough, but the consequences are of the nature of delayed action when compared with the immediate action of contaminated food.

Your Council is to be commended on their contemplated intention to introduce by stages Smoke Control areas in the Urban District.

The task of establishing a smoke control area, in an area in which coal burning houses now exist, will be a considerable one and will involve individual inspection of each house to ascertain that the fireplaces used are capable of burning smoke-less fuel and if not, then advising the tenant of the adaptations or replacements which will have to be carried out and as to what contributory grants towards the cost can be made.

I thank the Housing Committee for the sympathetic consideration they have given to cases referred to them for re-housing on medical grounds. At the same time I am constrained to make some observations on the housing situation.

By far, the largest number of interviews sought with me are to solicit my help in obtaining a Council house. In the majority of cases their application is based on medical grounds or ill-health attributable to unsatisfactory housing conditions and one cannot but sympathise with them in their anxiety.

They see new Council houses going up in the district and they cannot have one and to them the explanation given is a disappointing one when you tell them that such houses are to house families whose houses are under Demolition Orders or are in Clearance Areas, or are for Overspill purposes, and that the only hope for them at the moment is the possibility of re-lets turning up ; and there again they are up against a long waiting list which might put their application back a considerable length of time.

With a view to helping in this unhappy situation I would strongly suggest that in allocating tenancies, a certain degree of flexibility should be introduced to the present system of allocation. Applications should not be subjected to rigid time and length of application qualification. Consideration of the urgency of the application is always the procedure to be recommended.

It is unfortunate that on account of the subsidy position which only operates in respect of houses to replace houses under Demolition Orders or in Clearance Areas or for Overspill purposes that a proportion of the new Council houses going up cannot be allocated for general housing purposes, a position which militates against the recommendation I have made above.

On the other hand there is an increasing tendency for many to think that the Local Authority should find houses for them. There is no such obligation.

Of course, with a view to ensuring better prospects for general need applicants the Local Authority themselves might give consideration to the building of houses and charging economic rents to meet the cost ; but this would not be looked upon with any great favour by those on the present waiting list or by future applicants when at the present moment they see so many who are occupying subsidised houses at comparatively much lower rents.

In view of prevailing prosperity and in this era of high wages and adequate income as evidenced by the acquisition of television, washing machines and cars I feel that the Ministry of Housing would not be inclined to look upon the idea of granting subsidy for General Purpose houses with favour, with the exception perhaps for small houses for Old People.

I express my appreciation of the help and support given me by the Chairman and Members of the Health Committee.

The co-operation of the private practitioners is also much appreciated and the helpful assistance given me by your Clerk and other officers and members of the staff of the Council is gratefully acknowledged.

I have the honour to be,

Your obedient Servant,

F. B. MACKENZIE,

Acting Medical Officer of Health.

GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA.

The Medical Officer of Health holds office in virtue of a joint appointment by the Sedgley Urban District Council, the Tettenhall Urban District Council, and the Staffordshire County Council on a time distribution basis of 5/11ths, 2/11ths and 4/11ths respectively.

As Medical Officer of Health of the Urban District his duties are those laid down under the various Public Health Acts and Regulations, in short to inform himself of all matters likely to affect the health of the Urban District and to advise the Council in such matters and to make an Annual Report on the work of the Public Health Department and the health of the district.

As Assistant County Medical Officer he undertakes such School Medical Inspections, Minor Ailment School Clinics, Immunisation Sessions and Maternity and Child Welfare Clinics in the Urban District as may be directed by the County Authority.

The Public Health Inspector is a full time appointment by the District Authority. He is a qualified Meat and Food Inspector. Under the general direction of the Medical Officer of Health he performs all the duties imposed on a public health inspector by statute and by any orders, regulations or directions from time to time made or given by the Minister, and by any byelaws or instructions of the local authority applicable to his office.

Public Health and Sanitary matters are brought forward in the Public Health Committee, while Housing and Rehousing matters are dealt with in the Housing Committee. These two Committees meet once monthly.

There are two Health Visitors, three General Nurse/Midwives and one General Nurse for the District, all under the direction of the County Council.

In accordance with Part III of the National Health Service Act the following services are provided by the Local Health Authority, namely the County Council, the organisation and administration being in the hands of the County Medical Officer of Health.

(a) Health Centres.

(b) Care of Mothers and Young Children.

- (c) Midwifery.
- (d) Health Visiting.
- (e) Home Nursing.
- (f) Vaccination and Immunisation.
- (g) Ambulance Services.
- (h) Prevention of Illness, care and after care.
- (i) Domestic Help.
- (j) Mental Health Services.

With the exception of Provision of Health Centres, all the required services are being provided within the area.

There will probably be some delegation of Part III functions and other powers to the district authority in the near future.

School Health Services.

The Medical Inspection of School Children is provided by the County Council who have also established Ophthalmic, Dental and Orthopaedic Clinics. The various age groups are examined periodically and from the School Inspections referred to these Clinics or to the General Practitioner if so required.

In cases of Infectious Disease, and if deemed necessary, special steps are taken in conjunction with the School Authorities to exclude scholars who have been in contact with such disease. Protective measures and isolation are furthermore under the direction of the Health Department.

The School, Dental, Ear, Nose and Throat, and Eye Clinics provided in the Urban District are given in a separate table together with sessions for Speech Therapy and Physiotherapy.

Maternity and Child Welfare.

The Staffordshire County Council maintains an Ante-Natal and Child Welfare Clinic at Tettenhall and Child Welfare Clinics at Tettenhall Wood and Castlecroft.

The Regional Hospital Board provides in addition for Maternity cases in New Cross Hospital, Wolverhampton. The Beeches Maternity Home in Wolverhampton is also available by arrangement. Cases wishing to remain at home are delivered by the County Midwives who can call on the obstetric assistance of a General Practitioner if required.

The Staffordshire County Council also provides for the care and treatment of deformed, mentally sub-normal and handicapped children. These cases are selected from School Medical Inspections and Child Welfare Clinics or referred by General Practitioners. Illegitimate, Homeless and Neglected Children are provided for in the Nurseries, Children's Homes and Remand Homes of the County.

Hospitals.

Administration of Hospitals and Specialist Services is the responsibility of the Birmingham Regional Hospital Board.

The Hospitals and Specialist departments serving the district and easily accessible, are those of Wolverhampton, Dudley and Birmingham.

Hospital treatment for cases suffering from Infectious Disease and in need of such treatment is provided in Moxley Hospital.

Tuberculosis.

Institutions are maintained by the Regional Hospital Board for the treatment of persons suffering from Tuberculosis. The visiting of Tuberculosis patients in relation to their care and after care is under the administration of the County Council. Chest Clinics are situated at Dudley and Wolverhampton and several Sanatoria are available.

Laboratory Facilities.

Pathological and Bacteriological examinations are made by the Public Health Laboratory Service in Stafford.

Clinics and Treatment Centres.**Tettenhall Welfare Centre, Upper Green.**

Infant Welfare Centre	Thursdays fortnightly 2 p.m. to 5 p.m.
Ante-Natal Clinic	Thursdays fortnightly 9 a.m. to 12 noon.
Relaxation Classes	Thursdays weekly 9-30 a.m. to 10-30 a.m. (Two sessions).
School Clinic	Thursdays fortnightly 9 a.m. to 12 noon.
Dental Clinic	Friday afternoons (by appointment).
Speech Therapy	Monday afternoon.
Physiotherapy	Monday morning and Tuesday afternoon.
Eye Clinic	Wednesday afternoon—as required.

Tettenhall Wood, The Institute.

Infant Welfare Centre	Thursdays fortnightly 2 p.m. to 5 p.m. Alternating with Infant Welfare Centre at Tettenhall.
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Castlecroft.

Infant Welfare Centre	Wednesdays fortnightly 2 p.m. to 5 p.m.
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Times and days of Clinics are of course liable to alteration from year to year.

Ambulances.

The Ambulance services are operated by the County Council. An Ambulance is stationed in Tettenhall from 8 a.m. until 5 p.m. Monday to Friday, and from 8 a.m. to 12 noon on Saturdays. After these times the service is continued at Darlaston, Telephone James Bridge 2591. Radio has been fitted to approx. 50% of the vehicles and intercommunication and contact is operated through Darlaston. This should contribute towards the speed-up of the Service.

National Assistance Act, 1948.

Since the passing of this Act the former Public Assistance Services ceased and were taken over by the National Assistance Board under the Ministry of National Insurance. The functions

of the Relieving Officers have therefore been discontinued and replaced by the Officers of the National Assistance Board. The National Assistance Board holds no office in the Urban District.

As under the National Health Insurance everyone is now medically insured, the Medical Supervision and treatment of necessitous cases has become the responsibility of the Medical Practitioner and the Regional Hospital Board. Other cases of necessitous cases, such as homeless, abandoned or neglected individuals are the responsibility of the County Welfare Authorities.

Domestic Help Service.

The number of Domestic Helps who have given service in the Urban District during 1958 was 12. In addition there were three Neighbourly Helps.

Old People's Clubs.

Lower Tettenhall.

In Charge.

“ Welcome Club.” Mr. G. H. Humphries, “ Sunnyside,”
Lower Street, Tettenhall.

Compton.

“ Remember Me Club ” Mrs. I. M. Davis, 175, Bridgnorth
Road, Compton.

Tettenhall Wood.

“ Forget-me-not-Club ” Mrs. W. F. MacNamara, 69, Mount
Road, Tettenhall Wood.

Upper Tettenhall.

Tettenhall O.P. Club. Mrs. P. Dumbell, “ The Gables,”
Wood Road, Tettenhall.

Finchfield.

“ Windmill O.P. Club ” Mrs. E. G. L. Pearce, 79, Windmill
Lane, Wightwick.

Area Welfare Officer : Mr. R. C. Cox, 6A, Birch Street, Wolverhampton.

Child Welfare Officer : Miss White, 153, Tettenhall Road, Wolverhampton.

Social Worker : Miss Burd, Old Police Buildings, Dudley.

VITAL STATISTICS.

					<i>Total.</i>	<i>M.</i>	<i>F.</i>
Live Births	..	..	..	..	219	100	119
Legitimate	..	..	..	..	213	99	114
Illegitimate	..	..	..	..	6	1	5
Still Births	..	..	..	..	9	6	3
Legitimate	..	..	..	..	7	5	2
Illegitimate	..	..	..	..	2	1	1
Live Birth Rate per 1,000 population	..	..	..	..	..	..	16.95
Standardised Birth Rate per 1,000 population	..	..	..	..	..	..	15.08
Still Birth Rate per 1,000 live and still births	..	..	..	..	..	..	39.47
Total Live and Still Births	..	..	..	..	..	..	228
Infant Deaths	..	..	..	..	..	..	1
Infant Mortality Rate per 1,000 live births	..	..	..	..	..	..	4.57
Legitimate Infant Mortality Rate per 1,000 legitimate live births	..	..	..	..	..	..	4.69
Illegitimate Infant Mortality Rate per 1,000 illegitimate live births	..	..	..	..	..	..	Nil
Neonatal Mortality Rate per 1,000 live births	..	..	..	..	..	..	4.57
Illegitimate live births per cent of total live births	..	..	..	..	..	..	2.74%
Maternal Deaths (including abortion)	..	..	..	..	..	..	Nil
Maternal Mortality Rate per 1,000 live and still births	..	..	..	..	..	..	Nil
					<i>Total.</i>	<i>M.</i>	<i>F.</i>
Deaths	..	..	..	..	109	56	53
Death Rate per 1,000 population	..	..	..	..	..	..	8.44
Standardised Death Rate per 1,000 population	..	..	..	..	..	..	10.13
Deaths from Cancer (all ages)	..	..	..	..	..	..	13
Deaths from Measles (all ages)	..	..	..	..	..	..	Nil
Deaths from Whooping Cough (all ages)	..	..	..	..	..	..	Nil
Deaths from Gastritis, Enteritis, and Diarrhoea	..	..	..	..	..	..	1

OBSERVATIONS ON VITAL STATISTICS.

No two districts are exactly alike as regards the composition of their respective populations. With this in mind the Registrar General supplies for each local area what are known as "Comparability Factors" in respect of births and deaths, by which corrected or standardised rates for the district may be arrived at.

The Birth comparability factor for Tettenhall is given as 0.89. The standardised birth rate for the district is therefore 15.08 (16.95×0.89), which is lower than the rate for England and Wales, 16.4.

The Death comparability factor is given as 1.20. The standardised death rate for the district is therefore 10.13 (8.44×1.20), which is lower than the death rate per 1,000 population in England and Wales, 11.7.

The predominating causes of death continue to be heart disease, intracranial vascular lesions, cancer and bronchitis.

Natural Increase of Population.

The number of births exceeded the number of deaths by 110.

Infantile Mortality.

The Infantile Mortality Rate of 4.57 per 1,000 live births is a marked decrease on last year when it was 19.32. The rate for England and Wales is 22.5, which rate is a continued decline for the country as a whole. The rate for the district would appear to oscillate strongly from year to year. It would therefore be preferable in comparing and commenting on previous years to refer to the actual number of deaths which have occurred rather than rates. Comparison with rates for earlier years may have little significance when based on small numbers.

Maternal Mortality.

No maternal deaths were recorded during the year. This reflects credit on the Midwifery Service of the District, and the value of ante-natal supervision.

BIRTH RATES.

Year.	TETTENHALL.		England and Wales Birth Rate.
	No. of Births.	Birth Rate.	
1949	133	17.0	16.7
1950	122	14.3	15.8
1951	130	16.6	15.5
1952	130	16.4	15.3
1953	165	17.4	15.5
1954	184	18.3	15.2
1955	164	15.2	15.0
1956	218	19.1	15.7
1957	207	16.79	16.1
1958	219	16.95	16.4

DEATH RATES.

Year.	TETTENHALL.		England and Wales. Death Rate.
	No. of Deaths.	Death Rate.	
1949	90	11.5	11.7
1950	99	12.6	11.6
1951	136	17.3	12.5
1952	86	10.8	11.3
1953	78	8.2	11.4
1954	117	11.6	11.3
1955	130	12.1	11.7
1956	114	9.9	11.7
1957	129	10.46	11.5
1958	109	8.44	11.7

INFANTILE MORTALITY, 1958.

Nett deaths from causes stated at various ages under one year of age.

Cause of Death.	Under 1 week.	1 to 2 weeks.	2 to 3 weeks.	3 to 4 weeks.	Total under one month.	1 to 3 months.	3 to 6 months.	6 to 9 months.	9 to 12 months.	Total Deaths under one year.
Prematurity ..	1	—	—	—	1	—	—	—	—	1
Totals	1	—	—	—	1	—	—	—	—	1

INFANTILE MORTALITY RATES.

Year.	TETTENHALL.			England and Wales Rate per 1,000 births.
	Births.	Deaths.	Rate per 1,000 births.	
1949	133	4	30.0	32
1950	112	5	44.6	29.8
1951	130	4	30.7	29.6
1952	130	6	46.1	27.6
1953	165	2	12.1	26.8
1954	184	6	32.6	25.5
1955	164	4	24.4	24.9
1956	218	5	22.94	23.8
1957	207	4	19.32	23.0
1958	219	1	4.57	22.5

CAUSES OF DEATH DURING THE YEAR 1958.

Causes of Death.					M.	F.
1.	Tuberculosis, Respiratory	..	..	..	—	—
2.	Tuberculosis, Other	..	..	..	1	—
3.	Syphilitic Disease	..	..	..	—	1
4.	Diphtheria	..	..	..	—	—
5.	Whooping Cough	..	..	..	—	—
6.	Meningococcal Infections	..	..	..	—	—
7.	Acute Poliomyelitis	..	..	..	—	—
8.	Measles	..	..	..	—	—
9.	Other Infective and Parasitic Diseases	..	..	..	—	—
10.	Malignant Neoplasm, Stomach	..	..	..	—	4
11.	Malignant Neoplasm, Lung, Bronchus	..	..	..	2	1
12.	Malignant Neoplasm, Breast	..	..	..	—	1
13.	Malignant Neoplasm, Uterus	..	..	..	—	1
14.	Other Malignant and Lymphatic Neoplasms	..	..	..	3	1
15.	Leukaemia, Aleukaemia	..	..	..	—	1
16.	Diabetes	..	..	..	—	1
17.	Vascular Lesions of Nervous System	..	..	..	6	7
18.	Coronary Disease, Angina	..	..	..	17	6
19.	Hypertension, with Heart Disease	..	..	..	2	1
20.	Other Heart Disease	..	..	..	10	11
21.	Other Circulatory Disease	..	..	..	—	3
22.	Influenza	..	..	..	1	—
23.	Pneumonia	..	..	..	3	3
24.	Bronchitis	..	..	..	4	4
25.	Other Diseases of Respiratory System	..	..	..	—	—
26.	Ulcer of Stomach and Duodenum	..	..	..	1	—
27.	Gastritis, Enteritis and Diarrhoea	..	..	..	—	1
28.	Nephritis and Nephrosis	..	..	..	1	—
29.	Hyperplasia of Prostate	..	..	..	1	—
30.	Pregnancy, Childbirth, Abortion	..	..	..	—	—
31.	Congenital Malformations	..	..	..	—	—
32.	Other Defined and Ill-Defined Diseases	..	..	..	2	3
33.	Motor Vehicle Accidents	..	..	..	—	—
34.	All Other Accidents	..	..	..	1	2
35.	Suicide	..	..	..	1	1
36.	Homicide and Operations of War	..	..	..	—	—
All Causes					56	53
Deaths of Infants under 1 year—Total					—	1
Legitimate					—	1
Illegitimate					—	—

THE PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

The total number of notified cases of infectious disease was 160 as against 421 last year, exclusive of Tuberculosis.

Measles.

133 cases were notified as against 286 last year. One case was admitted to hospital.

Scarlet Fever.

9 cases were notified as against 2 last year. One case was admitted to hospital.

Whooping Cough.

2 cases were notified as against 116 last year. No cases were admitted to hospital.

Acute Pneumonia.

13 cases were notified, the same as last year.

Meningococcal Infection.

There was one case, which was admitted to hospital.

Puerperal Pyrexia.

One case was notified as against two last year. This case was admitted to hospital.

Acute Poliomyelitis.

One case was notified. This case was a child, age 1.5/12 years. Admitted Hospital 28th August, 1958. Confirmed 3rd September. Paralysis, right leg. In Hospital four months. Condition on

discharge—Paresis of right leg. Still visiting for regular therapy treatment. Wearing special boot and walks with a slight drag. This was an isolated case in the district and no history of having been in contact outside the area and lived in a new Council house.

Cases Admitted to Hospital.

During the year eight cases were admitted to hospital, as follows :—

- One case Scarlet Fever—Parkfields Hospital, Wolverhampton.
- One case Measles—Moxley Hospital.
- One case Pulmonary Tuberculosis—Cheshire Joint Sanatorium.
- One case Pulmonary Tuberculosis—Prestwood Sanatorium.
- One case Pulmonary Tuberculosis—The Limes Sanatorium, Himley.
- One case Poliomyelitis—The Royal Hospital, Wolverhampton.
- One case Meningococcal Infection—Little Bromwich General Hospital.
- One case Puerperal Pyrexia—The Women's Hospital, Wolverhampton.

Swabs and Specimens.

Submitted to the Public Health Laboratory Service :—
Sputa—12.

General Measures.

School Notifications of Infectious Disease are received by the Health Department and carefully studied for any features necessitating prompt action.

When desirable the schools are disinfected and terminal disinfection of premises and articles in affected households which have been exposed to infection carried out in all cases.

Smallpox.

Cases of suspected Smallpox are notified to the Smallpox Consultant in cases of doubt, who then takes further charge of the disposal of the case. Local protective and preventive measures are under the direction of the Health Department.

Vaccination and Immunisation.

The County Council does not provide for a Vaccination Centre in Tettenhall, but arrangements can be made with the Medical Practitioners by those who wish themselves or their children vaccinated.

Immunisation against Diphtheria and Whooping Cough and Poliomyelitis Vaccination is undertaken in the Child Welfare and School Clinics, while special Immunisation Sessions in Schools provide for an increase in the immunity of the child population.

The administration of Poliomyelitis Vaccination is in the hands of the Area Office at Brierley Hill.

With the advent of Poliomyelitis vaccine, and being in good supply, immunisation sessions have been held in all the schools in the area and at the Clinics in the course of the year.

The acceptance response in respect of school children has been good and it is hoped that a reduction in the incidence of this crippling disease in the country as a whole will result. The intensive campaign that has been carried out against Poliomyelitis has perhaps reacted against the time available for Diphtheria Immunisation, but nevertheless a satisfactory level has been maintained, nor has there been any case of diphtheria in the district.

A table furnished by the Ministry of Health gives information which points to the undoubted efficacy of Diphtheria Immunisation.

<i>Year.</i>		<i>Deaths.</i>		<i>Corrected Notifications.</i>
1948	..	156	..	3,575
1949	..	84	..	1,890
1950	..	49	..	962
1951	..	33	..	664
1952	..	32	..	376
1953	..	23	..	266
1954	..	9	..	176
1955	..	13	..	155
1956	..	8	..	53
1957	..	6	..	37

We have continued to avail ourselves of the opportunity given by the Central Council of Information to place advertisements in the Local Press in order to stimulate Diphtheria Immunisation.

National Assistance Acts, 1948 and 1951.

It was not found necessary to exercise powers under the Section of the Act which deals with the case of aged and infirm persons incapable of looking after themselves.

Two persons, however, in need of care and attention were persuaded to enter voluntarily Ivy House at Cannock.

AGE-GROUPS AND LOCALITY — DISTRIBUTION OF INFECTIOUS DISEASES.
(EXCLUDING TUBERCULOSIS) NOTIFIED IN 1958.

DISEASE.	Total all ages.	SEX		Under one year.	1 to 2 years.	2 to 3 years.	3 to 4 years.	4 to 5 years.	5 to 10 years.	10 to 15 years.	15 to 25 years.	25 to 45 years.	45 to 65 years.	65 and over.	Age unknown.	Tettenhall.	Tettenhall Wood.	Compton.	Wightwick.	Finchfield.	Castlecroft.
		M.	F.																		
Scarlet Fever ..	9	6	3	—	—	—	2	—	6	—	—	1	—	—	—	7	1	—	—	1	—
Whooping Cough ..	2	2	—	—	—	—	1	—	1	—	—	—	—	—	—	1	1	—	—	—	—
Acute Poliomyelitis (Paralytic) ..	1	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Measles ..	133	71	62	5	10	16	18	15	66	1	—	—	—	—	2	28	35	7	18	22	23
Pneumonia ..	13	6	7	—	—	—	—	—	—	—	1	2	—	4	1	4	1	2	—	6	—
Meningitis ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—
Puerperal Pyrexia	1	—	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—
	160	86	74	5	11	16	21	15	73	1	1	7	2	4	4	41	38	9	18	30	24

TUBERCULOSIS.

The number of new cases notified during the year was three Pulmonary as against seven Pulmonary in the year 1957. There has been a transfer to the Tettenhall Urban District of four Pulmonary cases from outside districts, who were originally on other registers.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year ..	—	—	—	—	—	—	—	—
1— 4 years ..	—	—	—	—	—	—	—	—
5— 9 years ..	—	—	—	—	—	—	—	—
10—14 years ..	—	—	—	—	—	—	—	—
15—19 years ..	—	1	—	—	—	—	—	—
20—24 years ..	—	—	—	—	—	—	—	—
25—34 years ..	—	—	—	—	—	—	—	—
35—44 years ..	—	—	—	—	—	—	—	—
45—54 years ..	—	1	—	—	—	—	—	—
55—64 years ..	—	—	—	—	—	—	—	—
65 and over ..	1	—	—	—	—	—	1	—
Totals	1	2	—	—	—	—	1	—

Yearly Figures for Last Decade.

Year.	New Cases.		Deaths.		Death Rate.	
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1949	6	—	2	—	0.25	—
1950	2	—	—	1	—	0.12
1951	2	—	3	—	0.38	—
1952	13	—	1	—	0.13	—
1953	15	1	1	—	0.105	—
1954	14	1	2	—	0.199	—
1955	13	1	1	—	0.093	—
1956	15	—	—	—	—	—
1957	7	—	—	—	—	—
1958	3	—	—	1	—	.077

Tuberculosis Rehousing.

The one case remaining on the Housing List at the end of 1957 left the district, leaving no cases to be rehoused during 1958.

Tuberculosis Register.

At the end of the year 1958 our Register counted 58 cases of Pulmonary and three cases of Non-Pulmonary Tuberculosis.

GENERAL PUBLIC HEALTH.

Food Hygiene.

Now that the first impact of the Food Hygiene Regulations has been absorbed and accepted by shop owners and food handlers, the conditions now prevailing in the shops in the district can on the whole be regarded as satisfactory. Nevertheless, vigilance and frequency of inspection by your Public Health Inspector of every shop and place in which food is handled or purveyed is still necessary to ensure that the Regulations are being complied with.

There have been no cases of food poisoning in the district during the year but the occurrence of outbreaks of food poisoning from time to time throughout the country draws attention to the necessity for the strictest personal cleanliness of all food handlers whether in the preparation of food or in the transport and storage of same.

The provision of all the modern facilities, refrigerators, hot water units, tiled walls, etc., is of little avail if the commonsense basic principles of personal cleanliness and hygiene whether in the shop or in the home, are not observed by all.

The presence of mobile shops and vans operating in the district would appear to call for attention and there is a tendency for the number of such vehicles to increase.

Clean Air.

The policy for Clean Air is a national one in which everyone has a part to play including individual householders whose domestic chimneys contribute some 45% of all the smoke discharged in the country.

During the last few years considerable publicity has been given to the problem of cleaning the air we breathe. Apart from the fact that smoke creates dirt and squalor and blackens and corrodes buildings, it has been proved beyond doubt that it has a deleterious effect upon health.

The only effective way of ameliorating the situation is making of Smoke Control Orders under Section 11 of the Clean Air Act, 1956. During the two years since the Act was operative 125 Local Authorities have decided to use their powers to make such Orders.

Even though the Urban District is on the periphery of a "Black" area, with a view to making a start in dealing with the problem the Council has approved in principle the establishing of one smoke control area on the western side of the district and has also made bye-laws in respect of all future new buildings, whatever the type, local authority, private, industrial or business, to ensure that they are smoke controlled from the outset. With the ultimate long term policy of making the district smokeless by establishing further smokeless areas advancing east from the western part of the district, this policy should eventually tie up with the schemes envisaged by Wolverhampton and adjoining authorities.

In the area in which the Council has approved in principle the establishing of smoke control the conversion should not be excessively or unreasonably heavy in cost as most of the houses are modern type or are recently built private houses and necessary adaptations should not be extensive.

The number of premises in the area in which the Council has approved in principle the establishing of a smoke control area is approximately 433, made up as follows: 405 existing dwelling houses, 21 in course of construction, and 7 business premises, in an area of 1,020 acres. It is considered 350 of the houses approximately will require some sort of fireplace conversion or adaptation.

In future Council Estates, it should be a condition of tenancy from the start that only smokeless fuels should be burned otherwise they will burn coal when they go in, only to be prohibited from doing so later.

Fluoridation of Water and the Prevention of Dental Decay.

I submit extracts from the Ministry of Health Reference Note No. 9 on the subject.

"At least half of the children entering school at five years of age already have five or six defective teeth."

"It is most important, therefore, that dental caries should be reduced and the most effective means of achieving this is the fluoridation of water supplied in those areas where the fluoride is low. Fluoride is present in small amounts in most water supplies."

“ As regards medical aspects, there is no scientific evidence whatever that fluoride at a level of one part per million has any deleterious effect on the health of adults or children. Fluoridation is not medication. It is a preventive measure. In one sense fluoridation may be compared with chlorination. Chlorine is added to water supplies to prevent the growth of harmful organisms. Fluoride is to be added to prevent the decay of children's teeth and to prevent consequent illhealth then and in later life. There is already enough evidence of both the value and harmlessness of fluoridation to justify its controlled use in this country.”

“ As regards the adverse effects on water, the addition of one part per million of fluoride does not affect its taste, its steam raising properties, its effect on cooking or on cooking utensils or on plumbing, nor its hardness or softness.”

I have been in touch with the Water Engineer and he informs me that the matter is being investigated at a National level and that the Ministry is now carrying out an experimental survey of the water supplies of some selected communities to which fluoridation has been introduced.

In view of the evidence which has now been amassed, particularly in the United States, in favour of fluoridation of water, I would recommend that fluoridation be introduced to the Tettenhall supply subject to the Ministry's final report being favourable.

Radiation Hazards.

A Sessional Meeting of the Royal Society for the Promotion of Health was held in the Wulfrun Hall, Wolverhampton, in December, which I attended. The meeting was convened not for the purpose of giving a presentation or interpretation of an official or central directive by the Government on the subject, but purely for the purpose of giving a basis for thought by local authorities on the subject.

Today industry is giving its attention to the possibilities of making use of radio-active substances and irradiating apparatus. So, as the harnessing of atomic or nuclear power or radiation to industry develops, it follows that in the not too distant future consideration will have to be given to radiation hazards and to the need for information as to the control of the operating hazards and as to the disposal of radio-active wastes.

No doubt a directive Circular will be issued in due course by the Ministry of Health or other responsible central authority for the guidance of local authorities.

It should be the responsibility of a central Government-controlled body with its highly trained staff, to issue to factories and industry such kinds and amounts of radio-active material that it is satisfied may be safely used, and used only in specified premises.

A list of issues should be supplied to the Medical Officer of Health of the district to which the material is sent and the location of the premises using it. The factory or institution should consult with the local authority about the disposal of radio-active wastes.

SANITARY CIRCUMSTANCES OF THE AREA.

Water.

The Tettenhall Urban District is supplied by the Wolverhampton Corporation Water Undertaking.

I am indebted to Mr. B. L. McMillan, B.Sc., M.Inst.C.E., M.Inst.W.E., Water Engineer and Manager, for the following information :—

- (i) The water supply has been satisfactory in quantity and quality.
- (ii) The following is a summary of the Bacteriological examination of water going into distribution.

No. of Samples taken.	Presumptive Coli-Aerogenes Organisms per 100 ml.			
	0	1—2	3—10	Over 10
869	823	33	5	8
Percentage of samples taken	94.7	3.8	0.6	0.9

- (iii) The water supplied is not liable to have plumbo-solvent action.

- (iv) There has been no known contamination of the water supply subsequent to leaving the works.

The population supplied from the mains in the District is 12,914. Of the houses in the district, 4,218 obtain water direct from the mains, and three houses have a well supply. These houses are situated at a considerable distance from the mains and the connection to the Wolverhampton supply has proved to be uneconomical. Samples taken during the year for bacteriological examination proved satisfactory. The results were as follows :—

	Coliform Bacilli MacConkey 2 days 37°C.	Faecal Coli
Well No. 1, Wergs Hall— 9th June, 1958	Nil	Nil
Well No. 2, Dippons Cottage— 9th June, 1958	Nil	Nil
Well No. 3, Perton Mill Farm— 7th August, 1958	Nil	Nil

Sewage Disposal.

The effluent from the Sewage Works at Blackbrook will continue to deteriorate as more and more development proceeds in the catchment area. The Council are fully aware of the unsatisfactory conditions prevailing.

The Minister of Housing and Local Government in a letter dated 8th October, 1958, gave approval to the detailed drawings of the proposed new Sewage Works and to the Council going to tender for the construction.

The Council's Engineers, Messrs. Wilcox, Raikes and Marshall, are proceeding with the preparation of the final drawings and quantities in readiness for tenders to be obtained early in 1959 for the construction of the new Works.

Refuse Collection and Disposal.

The house refuse has continued to be tipped on the old sand mine at the rear of Wightwick Mill Farm, which is proving to be satisfactory. During the year the house refuse has been collected on an average of once every nine days.

HOUSING.

The Council own 895 houses of which 75 have been allocated to Wolverhampton Corporation for Overspill. The Overspill target is 300 in the 10 years 1957/1966.

During 1958, 132 Private and 66 Council houses were completed. Of the 66 Council houses, 37 went to Wolverhampton Overspill.

Progress continues to be made in the development of the Grange Estate for Council housing. A start has been made in the clearance of Lower Street Compulsory Purchase Order area and it is hoped that clearance and redevelopment of this area will be expedited in 1959.

No progress has been made on the Aldersley Road Clearance Area, since the Official Representation was made by Dr. Falkman in November, 1956.

The action taken on Individual Unfit Houses is reported on in more detail in the section of the Report submitted by the Public Health Inspector.

No Improvement Grants have been made during the year.

Recommendations for rehousing on overcrowding and on medical grounds are submitted to the Public Health and Housing Committees when considered necessary.

At the end of the year there were 254 applicants on the waiting list, made up as follows :—

Childless Couples in Rooms	56
With Children in Rooms	63
Already in Occupation of a House	85
Applicants for Aged Persons Dwellings	50

In my opening remarks I have already commented on the need for houses for general purposes and this is supported by the number of applicants as shown on the waiting list above. In the present existing position as to the availability of houses, general need applicants are at a disadvantage.

The Housing Committee have had to rely solely for general need purposes upon re-lets—rather a limited number each year. This in my opinion is an unsatisfactory position. Consideration and thought might therefore be given to the feasibility of providing houses for general need purposes at economic rents.

Many of the properties the Health Committee have visited in the course of the year are by no stretch of imagination slum, but they are undoubtedly old and substandard in so far as they do not have a bathroom, a running hot and cold water supply, an inside W.C. and adequate food storage facilities. Many of these properties are of the rural cottage type and though picturesque and attractive from the outside, lack the amenities above mentioned.

If they could be regarded as structurally sound and good for another twenty years consideration might be given to effecting improvements but I am afraid they fall short.

It therefore follows that in the majority of cases demolition will be their ultimate fate. Fortunately as they are widely apart, the question of density as affecting health does not arise.

Houses in Clearance Areas and Unfit houses elsewhere, dealt with during the year 1958 :—

A. Houses Demolished.

In Clearance Areas.	Houses Demolished.	Displaced during year.	
		Persons.	Families.
1. Houses unfit for human habitation	6	21	6
2. Houses included by reason of bad arrangement, etc.	—	—	—
3. Houses on land acquired under Sec. 43 (2) H.A. 1957 . .	—	—	—
Not in Clearance Areas.			
4. As a result of formal or informal procedure under Sec. 17 (1) H.A. 1957	5	44	12
5. Local Authority owned houses certified unfit by the M.O.H.	—	—	—
6. Houses unfit for human habitation where action has been taken under local Acts . .	—	—	—
7. Unfit houses included in Unfitness Orders	—	—	—

B. Unfit Houses Closed.

	Number.	Displaced during year.	
		Persons.	Families.
8. Under Sections 16 (4), 17(1) and 35(1) H.A. 1957	—	—	—
9. Under Sections 17(3) and 26 H.A. 1957	—	—	—
10. Parts of buildings closed under Sec. 18, H.A. 1957	—	—	—

C. Unfit Houses made fit and Houses in which defects were remedied.

		By Owner.	By Local Authority.
11. After informal action by local authority ..		19	—
12. After formal notice under			
(a) Public Health Acts		7	—
(b) Sec. 9 and 16 H.A. 1957		—	—
13. Under Sec. 24, H.A. 1957		—	—

D. Unfit Houses in temporary use (Housing Act, 1957).

Position at end of year.	No. of houses.	No. of separate dwellings contained in Col. (1)
	(1)	(2)
14. Retained for temporary accommodation.		
(a) Under Section 48 ..	—	—
(b) Under Section 17(2) ..	—	—
(c) Under Section 46 ..	—	—
15. Licensed for temporary occupation under Sections 34 or 53 ..	—	—

E. Purchase of Houses by Agreement.

	No. of houses. (1)	No. of occupants of houses in Col. (1) (2)
16. Houses in Clearance Areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders, purchased in the year.	3	Now demolished 8

REPORT OF THE PUBLIC HEALTH INSPECTOR.

HOUSING.

Action taken by the Public Health Committee acting for the Council under Delegated Powers on individual premises.

- 3 and 5, School Road—Demolition Order 10/1/58.
- 5, Yew Tree Lane—Demolition Order 20/10/58.
- 1 and 2, -Wightwick Bank—Demolition Order 20/10/58.
- 1 and 2, Redhouse Cottages—Demolition Order 20/10/58.
- 56, 58, 60, Lower Street—Official Representation submitted 13/11/58.
- 27 to 39, Upper Street—Official Representation submitted 11/12/58.
- “ Woodview,” Mill Lane—Official Representation submitted 11/12/58.

Individual Unfit Houses demolished during the year.

- Old Boundary Farm, Perton Road.
- Perton Grove Cottage, Perton Road.
- Yew Tree Cottage, Woodthorne Road South.
- 3 Grove Lane.

At the end of the year under review the following properties on which individual orders were operative were still occupied :—

- 2, Upper Street—Closing Order made 18/11/53.
- 10, Oak Hill—Demolition Order made 14/3/55.
- 69, Lower Street—Closing Order made 14/3/55.
- 24, Limes Road—Closing Order made 9/9/55.
- 20, Finchfield Road—Demolition Order made 11/10/55.
- 43 and 51, Bridgnorth Road—Demolition Order made 11/2/57.
- 1, 2 and 4, Perton Grove Cottages—Undertaking accepted 4/2/57.
- 2, Shaw Lane—Demolition Order 5/4/57.
- 13, Upper Green—Undertaking accepted 25/2/57.
- 3 and 5, School Road—Demolition Order 10/1/58.
- 5, Yew Tree Lane—Demolition Order made 20/10/58.
- 1 and 2, Wightwick Bank—Demolition Order made 20/10/58.
- 1 and 2, Redhouse Cottages—Demolition Order made 20/10/58.

Lower Street C.P.O. Confirmed 1956.

Only six of the houses in this area have been demolished during the year and twelve families are still in residence.

Aldersley Road Clearance Area.

Official Representation was made in respect of this area in November, 1956, but no further progress has been made.

Rehousing.

During the year 18 families were rehoused into Council property.

During the year it was necessary to report on the dangerous and dilapidated conditions that arise when houses are left vacant for any considerable period before demolition. The conditions that accrue from the stripping of premises can give rise to considerable anxiety and I think that the rehousing and demolition should be considered as a joint operation.

Survey.

A survey of the older cottage property within the area was made with a view to ascertaining the number of houses with only external scullery facilities. From the survey it was found that 62 houses, mainly of the terrace type and in good structural condition, had all the water supply and washing facilities sited in the external scullery buildings and that also in the majority of cases all the cooking facilities were found in these outside buildings. By reason of these defects the houses could be classified as sub-standard, but by structural alteration, improvement and modernisation, these houses could be given a useful and satisfactory life. A practical point from an administrative aspect gleaned from this brief survey is the need for a comprehensive survey of all the lower rated properties within the district with a view to determining their possibilities for improvement and modernisation.

The lack of general interest in the improvement and modernisation of houses makes one consider whether Statutory Powers should be given to local authorities to enable old houses to be modernised and made into useful dwellings. Since the Housing Act, 1949, came into force only 18 grants have been approved by the Council at a total cost of £5,006. The improvement grant system is designed to raise the standard of housing and it is unfortunate that it has not been put to more use.

In view of the bearing that adverse housing conditions have on health, the Health Department should have a greater say in rehousing. I am sure that if need is the criterion then health must at least be the basis of all rehousing considerations. Recommendations made by the Medical Officer of Health and myself in respect of housing, are only made after full consideration of all the circumstances.

Also it is felt that the necessary replacement housing accommodation should be available as soon as Housing Orders are operative. Periods of anything up to three and four years are arising between the making of Orders and rehousing of tenants, during which time owners are loath to carry out even first-aid repairs and simple defects can deteriorate into very unpleasant situations.

Reconditioning.

Plans and specifications were submitted to the Council on behalf of the owners of 41, Mount Road, Tettenhall Wood for revocation of Demolition Order made on 13/12/55. The scheme was approved in principle and the work commenced but not completed during the year.

Notices served for repairs and improvements of houses, under the Public Health Act were as follows :—

INFORMAL.		STATUTORY.	
No. of Houses.	No. of Defects.	No. of Houses.	No. of Defects.
38	59	7	9

Rent Act, 1957.

During the year only nine applications have been received for Certificates of Disrepair.

Four Undertakings have been given by landlords to tenants, four other Undertakings by landlords were finally complied with after failure to carry out the necessary work within the Statutory period.

The above staistics in no way give a proper indication of the work that is being completed in houses through informal negotiations between landlord and tenants. From my knowledge of the district and the type of inquiries received I am of the opinion that considerably more housing repair work is being put in hand without recourse to the Health Department and the P.H.A. procedure.

Moveable Dwellings.

No applications were received during the year for licence to station moveable dwellings.

Sanitary Accommodation.

The undermentioned figures give a summary of the various types of sanitary conveniences other than modern type water-closets, which were in use at the end of 1958 :—

Waste Water Closets	..	..	18
Pail Closets..	..	..	8
Cesspools and Septic Tanks	..		70 approximately.

During the year four waste-water closets were discontinued and replaced with modern type fittings. Of the remaining 18, half are in houses which will be subject to Housing Act action within the next two or three years. Of the eight houses remaining with pail closets four have operative D.O's. and it is hoped that it will be possible to take action under the Housing Act on the other houses in the very near future.

The new building development within the district has increased the number of septic tanks and cesspools. I can only repeat previous comment and state that the use of Private septic tank drainage systems are not to be encouraged and are not in the best interests of environmental health. Public sewers are an essential factor in urban communities and should be extended to incorporate all the housing development.

Swimming Baths.

Only one small swimming bath is in use in the area and is under private control—a Public School.

During the year two samples of water were taken from this swimming bath, one for chemical examination and one for bacteriological examination. Both reports were satisfactory.

The Health Department has little control except to ascertain that the water is kept free from contamination so as to avoid the risk of the spread of infection.

FOOD INSPECTION AND HYGIENE.

Meat Inspection.

The following tables gives the number of animals slaughtered and percentages of number affected with disease :—

Carcases and offal inspected and condemned in whole or in part.

	Cattle, excluding Cows.	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed (if known) ..	309	Nil	5	2886	1115	Nil
Number inspected	309	Nil	5	2886	1115	Nil
All diseases except Tuberculosis and Cysticerci.						
Whole carcases condemned ..	Nil	Nil	Nil	2	3	Nil
Carcases of which some part or organ was condemned ..	15	Nil	Nil	61	47	Nil
Percentage of the number inspected affected with disease other than Tuberculosis or Cysticerci	4.85	Nil	Nil	2.18	4.5	Nil
Tuberculosis only.						
Whole carcases condemned ..	Nil	Nil	Nil	Nil	Nil	Nil
Carcases of which some part or organ was condemned ..	11	Nil	Nil	Nil	4	Nil
Percentage of the number of inspected affected with Tuberculosis	3.5	Nil	Nil	Nil	0.36	Nil
Cysticercosis.						
Carcases of which part or organ was condemned	Nil	Nil	Nil	Nil	Nil	Nil
Carcases submitted for treatment by refrigeration	Nil	Nil	Nil	Nil	Nil	Nil
Generalised and totally condemned	Nil	Nil	Nil	Nil	Nil	Nil

Outside of trimmings and strippings the following was condemned :—

266 lbs. of meat.
736 lbs. of offal.

This was disposed of by incineration or by delivering to the digester plant at Wolverhampton Abattoir.

The annual licences for the three slaughterhouses were renewed during the year under the provisions of Part 4 of the Food and Drugs Act, 1955.

A 100% inspection of carcasses was maintained. The total number of animals killed was reduced by approximately one quarter. This was occasioned by staffing difficulties at one of the slaughterhouses.

The premises have been maintained in a clean condition and the work is carried on in a satisfactory and humane manner.

Part of the meat inspection duties were carried on outside of normal office hours. This was necessary on 76 evenings, 11 Saturday afternoons and 12 Sunday mornings.

Slaughter of Animals Act, 1933—1954.

Ten licences to slaughter animals were renewed during the year.

Food Inspection.

Regular inspection of all foodstuffs is carried out at shops, storeplaces, food preparing premises and on vehicles.

The following articles were condemned during the year :—

1 tin Pork Picnic Shoulder.	35 tins Tomatoes.
3 tins and 13 lbs. Ham.	8 tins Evaporated Milk.
1 tin Corned Beef.	8 tins Peaches.
3 tins Minced Beef Loaf.	3 tins Pineapple.
1 tin Tongue.	12 tins Mandarin Oranges.
1 tin Ox Tongue.	2 tins Pears.
1 tin Pork Luncheon Meat.	24 tins Victoria Plums.
1 tin Pork Loins.	1 lb. Butter.
5½ lb. Lard.	6 lb. 12 oz. Cheese.
6 lb. Suet.	

Reports were submitted to the Council on the following :—
Three 1/3 pint bottles of school milk contaminated with foreign matter.
Result—Warning letters sent to producer.

Advice was given to one of the local school cookery departments on cod fillets affected with thread worm (*Filaria bicolor*), and to a local householder in respect of a fowl.

Informal action was taken in respect of several bottles of sour milk delivered to a local school.

I often think it is regrettable that members of the public do not notify the Department of foodstuffs they have purchased and with which they are in some way dissatisfied. On odd occasions over several years when interviewing the public, they tell me of foodstuffs they have purchased several weeks previously and state that if it had only been convenient they would have brought the foodstuffs to the office. On occasions I have been informed that the article has been returned to the tradespeople and the commodity replaced.

I am of the opinion that if the public would notify the Department, we could often effectively help the producer or management by bringing such things to their notice at a proper level, and be in a position more likely to prevent a recurrence of the conditions than a casual complaint to a tradesman or retailer would effect.

Ice-Cream.

Four samples were submitted to the Methylene Blue Test with the following results :—
4 in Grade 1.

Ice-Lollies.

Two samples were submitted for examination. The results were as detailed below :—

No. of samples submitted.	Plate Count per c.c.				B. Coli Content.	
	Under 10	10 to 100	100 to 1000	1000 plus	Nil in 0.3 c.c.	Present in 0.3 c.c.
2	—	2	—	—	2	—

Food Premises.

Within the district there are 71 shops retailing foodstuffs, 20 licensed premises and 4 off-licences.

There are 24 premises in which meals are prepared and served.

29 premises are registered for the sale of ice-cream.

Four premises are registered for the manufacture of sausages, or potted, pressed, pickled or preserved food.

12 Mobile Tradesmen retail groceries, fruit and vegetables within the area. Ice-Cream is also retailed from vehicles. No accurate figures are available of the exact number of roundsmen delivering bread and other foods.

Inspections.

During the year the inspection of all types of premises and vehicles from which food is distributed was continued with a view to enforcing the Hygiene Regulations. In the early part of the year particular attention was paid to all mobile tradesmen and roundsmen. Requests were made for improvements in general tidiness and cleanliness, provision of hot water supplies and washing facilities in shops and on vehicles, improvements in meat transport and in a vehicle retailing ice cream.

Altogether 35 informal notices were served requesting works or improvements.

Four Statutory Notices were served and complied with.

One new shop was built and completed during the year, following informal action. One owner undertook to provide new and more suitable premises to replace a small unsuitable shop.

Improvements were also made to the kitchens at the County Council schools within the district.

To maintain a good standard of hygiene in and around food premises, regular inspection is necessary, to keep management and staff alert to their obligations.

The following table gives a summary of licences issued by the Council to Milk Distributors in the area :—

Designation.	Supplementary Licences.	Dealer's Licences.	Total.
Tuberculin Tested ..	5	Nil	5
Pasteurised	5	1	6
Sterilised	5	16	21

Milk and Dairies.

All the milk supplied in the district is bottled and designated and is mainly from the milk heat-treatment plants in adjoining areas.

16 shops also retail bottled milk. This is an increase of three on the preceding year.

The control of the seven dairy farms within the district is under the supervision of the Ministry of Agriculture, Fisheries and Food.

The result of bacteriological examinations of samples of milk taken within the district are set out in the following table :—

Designation.	No. of samples submi'd	Phenol- phthalein.		Phos- phatase.		Turbidity		Methylene Blue.	
		Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail
Tuberculin Tested ..	16	—	—	—	—	—	—	16	—
T.T. (Past.)	11	—	—	10	—	—	—	6*	—
Pasteurised ..	9	—	—	9	—	—	—	5*	—
Sterilised ..	8	—	—	—	—	8	—	—	—

* 5 remaining colour tests void owing to High Atmospheric Temperature.

* 4 remaining colour tests void owing to High Atmospheric Temperature.

Of the above samples the following were also submitted to Biological Tests for Tubercle Bacilli :—

Designation.	No.	Negative.	Positive.
Tuberculin Tested	9	9	—

FOOD AND DRUGS ACT, 1955.

I am indebted to the Chief Inspector of the County Council for the following information regarding samples of food taken in Tettenhall.

Details of Milk and General Foods taken during 1958.

Articles of Food.	No. Samples.	Satisfactory.	Unsatisfactory
Milk	40	40	—
General Foods	42	35	7

Details are set out as follows :—

Milk.

Milk Pasteurised	7
Milk Sterilised	6
Milk T.T.	13
Milk T.T. Pasteurised	6
Milk T.T. Pasteurised Channel Island	8
	<hr/> 40 All Genuine <hr/>

General Foods.

Number of samples taken	42
Number of samples genuine	35
Number of samples adulterated	7

Particulars of Adulterated Samples.

- Tomato Juice—Formal—makes general claim that vitamins are present. Labels amended.
- Liver Paste Sausage—Informal—contains a cereal filler not included in list of ingredients. Stocks withdrawn from sale.
- Truffled Goose Liver—Informal—contained 42.0% of oil not included in list of ingredients. Extra fat due to use of specially fattened geese.
- Bovril—Formal—claim as to presence of Nicitinic Acid not in correct form. Labels amended.
- Coffee Blender—list of ingredients is incomplete and misleading. Matter being investigated with manufacturers in Holland.
- Fondue—Informal—contained 61.3% Moisture instead of not more than 60% and contained 17.7% fat instead of not less than 20%. Labels to be amended on reprinting.
- Fondue—Formal—contained alcoholic ingredient which should be included in list of ingredients. Labels to be amended on reprinting.

Classification of General Foods.

- | | |
|-----------------------------------|------------------------------|
| Pickapeppa Sauce. | English Butter. |
| Tomato Juice (2 samples). | Ice Cream. |
| Minestrone a L'Italienne. | Florentines. |
| Pasteurised Cheesy Paste. | Cream Cheese. |
| Smoked Salmon Mayonnaise. | Coffee Blender. |
| Liver Paste Sausage. | Live Yoghourt. |
| Tomato Paste. | Fish Chowder. |
| Peeled French Truffles. | Concentrated Liquid extract |
| Antipasto. | of Vegetable Origin. |
| Truffled Goose Liver. | Preserved Strawberries. |
| Bombay Duck (Indian Dried Fish). | Green Figs in Syrup. |
| Bovril. | Pure Carrot Juice. |
| Lemonade Powder. | Fondue (2 samples). |
| Tea. | Hearts of Palm. |
| New Zealand Butter. | Sanfayna. |
| Pork Sausage containing preserva- | Pork Sausage Meat containing |
| ative (2 samples). | preservative (2 samples). |
| Dripping. | Strasbourg Sausage in Brine. |
| Irish Stew. | Meat Balls in White Sauce. |
| Lemon Flavour Quick Flan. | Oak Smoked Kippers. |
| Condensed Tomato Soup. | Ice Cream made with Fresh |
| | Cream. |

CLEAN AIR.

Following a brief survey of the western part of the district a Smoke Control Area was submitted to the Ministry for primary approval. After approval in principle had been received, the detailed inspections of all the buildings in the area were commenced. This work was still in progress at the end of the year under review.

The proposed area is approximately 1,020 acres and contains 405 houses, 7 other buildings and 21 houses in course of construction.

I feel confident that if this first Smoke Control Area is approved it will be a decisive step towards maintaining the pleasing amenities of the district.

ROUTINE INSPECTION WORK.

Summary of the inspection work carried out during the year is given in the following table :—

Type of Prem ses Inspected.	Number of Inspections.
Water, Drainage and Sanitary Services	189
Refuse.. .. .	68
Rodent Control	141
Repairs to Premises	163
Food Premises	467
Infectious Disease	16
Shops other than Food Premises	41
Factories	47
Dairies	6
Housing Acts	256
Clean Air Act	259
Miscellaneous	181
Total	1834

**General Information Regarding Notices Served
During the Year.**

Form of Notice.	No. Served.	Premises.	Defects.
Informal :			
(a) General Sanitary Defects	131	153	172
Statutory :			
(a) Defects	18	20	37

No legal proceedings were taken during the year.

In addition, by informal action, 142 dustbins were provided to private houses.

Shops Acts 1912—1950.

Within the district there are 106 shops. This is a reduction of one on last year and is accounted for by the demolition of two shop premises and the opening of one new shop at Finchfield.

The regular inspection of all shops and records was carried on during the year. This work is usually carried out in conjunction with other activities under the Food and Drugs Act.

In the early part of the year inspections were made of all the mobile shops retailing in the district with a view to reducing the amount of retailing carried on after normal closing hours of shops within the district. Some considerable success was obtained by informal action, but complete compliance was not achieved. A small minority still continue to retail after the permitted hours allowed in shops. The activity of this small minority of tradespeople does create some reasonable criticism from shopkeepers.

A check was also made on Delivery Vans within the district but no offences against the Act were found.

Advice on the number of hours of work allowed for Young Persons in shop premises was given where necessary.

No Statutory action was taken during the year ; only informal notices were given in respect of closing hours and for the provision of one sanitary convenience.

The shops within the district are maintained in a reasonable condition and outside of closing hours no major problems are presented by the application of the Act.

Pet Animals Act, 1951.

No action was found necessary during the year.

Heating Appliances (Fireguards) Reg. 33.

No action was taken during the year.

RODENT CONTROL.

During the year 119 domestic premises were treated for infestation. 12 other premises were also treated. These included schools, shops, business premises and a building site.

Regular treatments were carried out on the Council Tip, Allotments, Sewage Farm and in the Regis Road Yard.

The Annual Test Baiting of sewer manholes was carried out in accordance with the Ministry of Agriculture, Fisheries and Food requirements. 100 manholes were test baited with only one resultant take. All the manholes in the vicinity of the take were all poison baited with negative results.

FACTORIES ACTS, 1937 AND 1948.

Inspections for purposes of provisions as to Health.

Premises.	No. in District.	Inspections.
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities (Workshops)	1	2
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority (Workshops with Mechanical Power)	15	25
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises)	22	20
Total	38	47

Defects Found.

Particulars.	Found.	Remedied.
Sanitary Conveniences Insufficient	3	3

MISCELLANEOUS.

Disinfestation treatments were carried out for book lice, wasps, fleas and flie infestations in various parts of the district.

Some help and assistance was also given in respect of treatment to eliminate cockroaches from domestic and kitchen premises.

Disinfection was also carried out at one house and to books from the Tettenhall Wood Library.

Following informal action 16 cats were removed from one house.

Mortuary.

During the year 15 Post Mortem examinations were performed in the Mortuary.

E. BARNES,

Publib Health Inspector.

